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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032  
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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration Submitted With Initial Filing **OR** ☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	PU030060
First Named Inventor	David L. McNeely
<b>COMPLETE IF KNOWN</b>	
Application Number	PCT/US04/07114
Filing Date	March 09 2004
Group Art Unit	
Examiner Name	

**As a below named inventor, I hereby declare that:**

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**CROSS-ENCODING OF INFORMATION IN INDEPENDENT CHANNELS**

the specification of which (Title of the Invention)

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) **09 March 2004** as United States Application Number or PCT International

Application Number **PCT/US04/07114** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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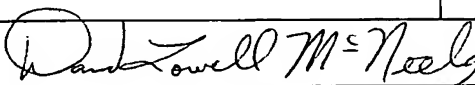
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<b>Address</b>		THOMSON LICENSING INC.	
<b>Address</b>		Two Independence Way	
<b>City</b>		<b>State</b>	<b>ZIP</b>
PRINCETON		NJ	08540
<b>Country</b>	<b>Telephone</b>		<b>Fax</b>
USA	609 734 6834		609 734 6888
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>			
<b>NAME OF SOLE OR FIRST INVENTOR:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
<b>Given Name</b>		<b>Family Name or Surname</b>	
DAVID LOWELL		MCNEELY	
<b>Inventor's Signature</b>			<b>Date</b>
			12 April 2004
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<b>City</b>	<b>State</b>	<b>ZIP</b>	<b>Country</b>
INDIANAPOLIS	INDIANA	46250	US
<b>NAME OF SECOND INVENTOR:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
<b>Given Name</b>		<b>Family Name or Surname</b>	
<b>Inventor's Signature</b>	<b>Date</b>		
<b>Residence: City</b>	<b>State</b>	<b>Country</b>	<b>Citizenship</b>
<b>Mailing Address</b>			
Mailing Address			
<b>City</b>	<b>State</b>	<b>ZIP</b>	<b>Country</b>
<input type="checkbox"/> Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.			

<b>POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM</b>	<b>Application Number</b>	
	<b>Filing Date</b>	Herewith
	<b>First Named Inventor</b>	David Lowell McNeely
	<b>Title</b>	CROSS-ENCODING OF INFORMATION IN INDEPENDENT CHANNELS
	<b>Art Unit</b>	
	<b>Examiner Name</b>	
	<b>Attorney Docket Number</b>	PU030060

I hereby appoint:

☒ Practitioners at Customer Number Customer Number 24498  
**OR**  
☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

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☐ The above-mentioned Customer Number:   
**OR**  
☐ The address associated with Customer Number:   
**OR**

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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
*Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).*

SIGNATURE of Applicant or Assignee of Record			
Name	Paul P. Kiel	Registration No.	40,677
Signature			
Date	August 31, 2006	Telephone	609-734-6815

**NOTE:** Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below".

☐ \*Total of   3   forms are submitted.

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We,

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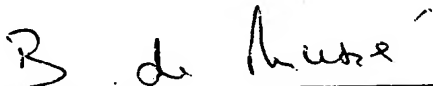
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DATED this \_\_\_\_14th\_\_\_\_ day of \_\_February\_\_, in the year 2006.

Signature:

Typed Name As Signed:

Title:

  
Béatrix de Russé  
Authorized Representative,  
Vice-President Intellectual Property & Licensing

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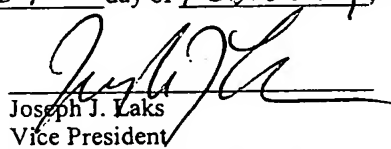
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DATED this 27<sup>th</sup> day of February, 2006.

SIGNED

  
Joseph J. Laks  
Vice President  
Thomson Licensing Inc. and  
Attorney In Fact for  
THOMSON LICENSING

WITNESS

